



**Auditor/Inspector
Customer Service Survey**
Michigan State Housing Development Authority
Compliance Monitoring
PO Box 30044
Lansing, MI 48909

As part of our continued efforts to improve MSHDA's compliance monitoring processes, we need your feedback. Please complete this survey and fax it to (517) 335-0125 or e-mail it to **MSHDA's Compliance Monitoring Section** at mshdacompli@michigan.gov.

Auditor/Inspector Name: _____ Auditor/Inspector Company: _____

Check the applicable box:

Physical Inspection ☐

Tenant File Audit ☐

Date: _____

Questions

1. Overall, please rate your experience with MSHDA's Auditor/Inspector. **Satisfied** ☐ **Undecided** ☐ **Unsatisfied** ☐

2. Did the Auditor/Inspector arrive on time?

Yes **No**

Comments: _____

☐ ☐

3. Was the Auditor/Inspector friendly and polite?

Yes **No**

Comments: _____

☐ ☐

4. Did the Auditor/Inspector clearly communicate with you any problems or concerns they may have had with the property's tenant files and/or conditions of the units?

Yes **No**

Comments: _____

☐ ☐

5. Are there any improvements you feel may make the MSHDA audit/inspection process easier?

No **Yes**

Comments: _____

☐ ☐

6. Any other comments or information you would like to share.

No **Yes**

Comments: _____

☐ ☐

7. Would you like MSHDA to contact you about any of the comments you have made above? (If yes, please make sure the contact information is filled out below.)

No **Yes**

Comments: _____

☐ ☐

The following fields are optional:

Your Name: _____ Title: _____

Phone Number: _____ Company Name: _____

Development Name: _____ MSHDA #: _____